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## Corrigendum

Corrigendum to “Inferring the 1985–2014 impact of mobile phone use on selected brain cancer subtypes using Bayesian structural time series and synthetic controls” [Environ. Int. (2016), 97, 100–107]

Frank de Vocht

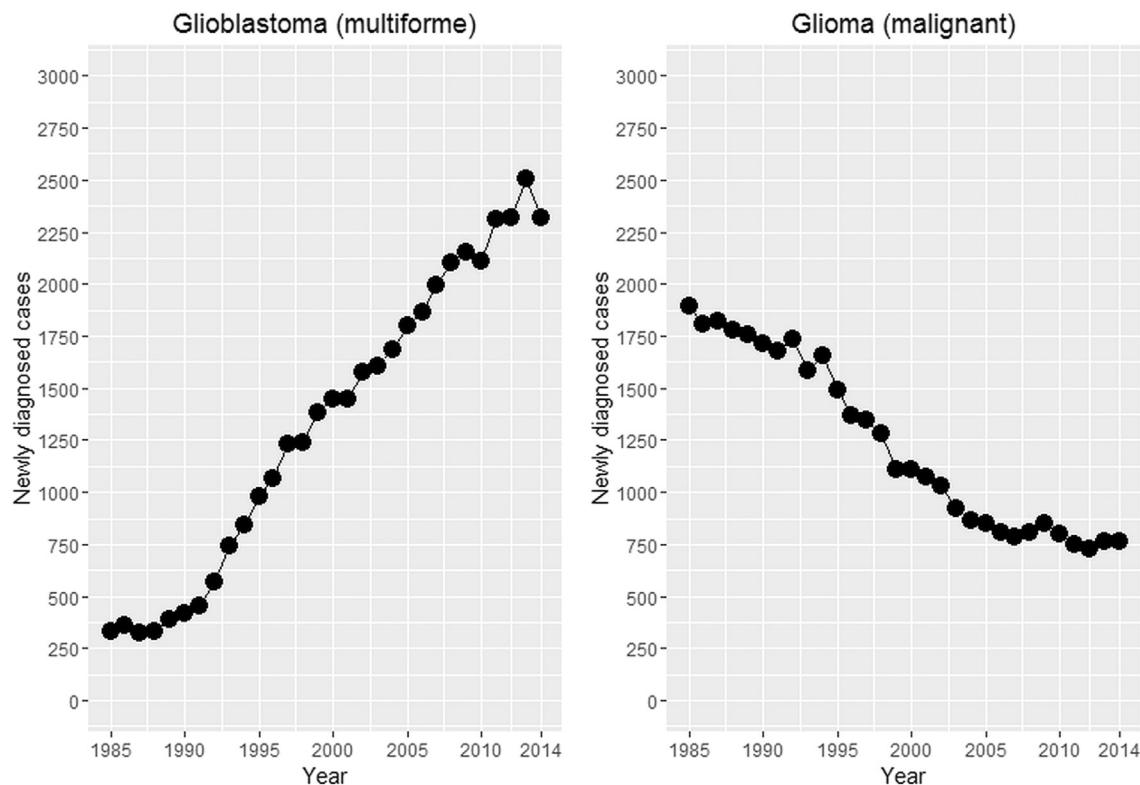
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The author regrets that, due to a misunderstanding between the author and the data provider, the incorrect data were used for malignant glioma and glioblastoma (multiforme).

As a result, the 1985–2014 trends shown in Fig. 1 and results of the statistical analyses shown in Table 1 and Fig. 2 are incorrect. This had no significant impact on the results of study, the interpretation

of the results, or on the conclusions in the paper, which remain unchanged; i.e. there is no evidence of a causal association between mobile phone use and the incidence of malignant glioma and glioblastoma (multiforme). The corrected results are shown in Figs. 1 and 2 and Table 1 below.

The author would like to apologise for any inconvenience caused.



**Fig. 1.** 1985–2014 annual number of newly registered cases of malignant glioma and glioblastoma multiforme.

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0160-4120/

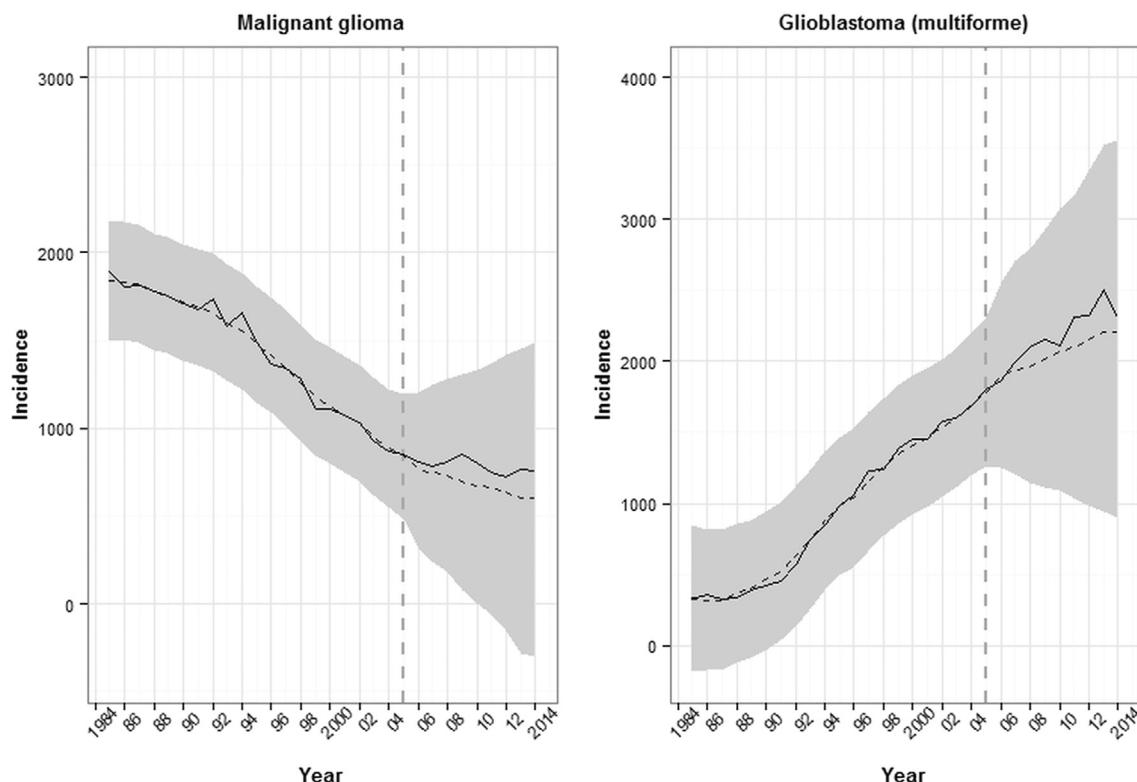
**Table 1**

Inferred impact of mobile phone use (and possibly other wireless technology) on annual incidence of selected brain cancer subtypes.

Histology based	Implied lag (from 1995)	Absolute average effect (95%CI)	Absolute cumulative effect (95%CI)	Relative effect (95%)	Posterior probability of effect
Malignant Glioma <sup>a</sup>	0 years	−387 (−1224, 313)	−7347 (−23,261, 5948)	−29% (−92%, 23%)	0.144
	5 years	312 (−585, 1413)	4375 (−8187, 19,780)	59% (−111%, 267%)	0.318
	10 years	102 (−448, 668)	922 (−4034, 6011)	15% (−66%, 98%)	0.362
	15 years	−10 (−465, 444)	−40 (−1859, 1775)	−1.3% (−61%, 58%)	0.484
Glioblastoma multiforme <sup>b</sup>	0 years	430 (−11,042, 2323)	8179 (−19,806, 44,138)	31% (−76%, 170%)	0.315
	5 years	−324 (−2072, 1054)	−4540 (−29,006, 14,762)	−14% (−90%, 46%)	0.395
	10 years	127 (−728, 950)	1142 (−6551, 8550)	6.2% (−35%, 46%)	0.377
	15 years	123 (−602, 847)	490 (−2408, 3387)	5.5% (−27%, 38%)	0.368

<sup>a</sup> ICD 9 site codes 191.0–191.9 (morphology codes M9380/3, M9382/3, M9400/3), ICD 10 site codes C71.0–C71.9 (morphology codes M9380/3, M9382/3, M9400/3).

<sup>b</sup> ICD 9 site codes 191.0–191.9 (morphology codes M9440/3, M9441/3, M9442/3,), ICD 10 site codes C71.0–C71.9 (morphology codes M9440/3, M9441/3, M9442/3).



**Fig. 2.** Measured (solid) and modelled (dashed) incidence trends (top) for malignant glioma and glioblastoma multiforme; implied 10-year lag. Grey areas correspond to 95% Credible Intervals.